File with: Iowa Ethics and Campaign Dieclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

A ETHICS AND

2010 OCT 19 PM 2: 01

COMMITTEE NAME (Must be same as on Statement of C	rganization)			
Tom Contner Greene Coun	ty Supervisor		FORM DR-2	
IMPORTANT: Indicate by # type of committee you are reporting fit (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Ca. Subdivision Candidate (8) County PAC (4) City	(2)State PAC (3)State Party	(Re	ev. 12/2009)	DISCLOSURE REPORT
Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Beliot Issue	ol Board or Other Political Subdivision PAC	(     1591	Office Use On	
CANDIDATE COMMITTEES ONLY:		Cor	71M.#	
Candidate Name	Political Party (if applicable)	Sca	inned	
Office Sought	Kepublican	Cor	nputer	
County Sapervisor	District (If Senate or House)			
Late reports are subject to possible civil and criminal penalties. I candidate's committee, and the chairperson, for any other type of	Pursuant to Iowa Code sections 68B.32A(	7) and 68A.	401(3), the can	didate, for a
Company of the property of the	515 370-5083 cell	tor tiling tim	ely and accurat	e reports.
Ouder K. Constner	515-386-2577	lo.	,0 ,0	
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	<u>10</u> -	-18-10 DATE 810	GNED
I AM FILING A 10-19-2010				
(report date)	REPORT FOR (1) ELECTION /		ECTION YEA	R.
CHECK IF AMENDMENT TO REPORT DATED	Indicate by #			
,			ttees, enter Date	
Check if this is final (termination) report and attach Notice		YOUR M	ber 2,	<u> </u>
(You must continue to file reports until a DR-3 is file	9G.)	hich Electio	n is held	since County III
		(ج بدو	me	
STATEMENT OF CASH ON HAN				
CASH ON HAND at the beginning of the reporting period. (T committee. This amount MUST be the same as the of the last reporting period or must be zero if this is		•	23.	52
ADD TOTAL MONEY TAKEN IN THIS PERIOD		Ψ,		<del></del>
Schedule A: Cash Contributions total (Attach Sche	dule A) (*also see in-kind below)		670.	00
Schedule F: Loans Received total (Attach Schedule				
Schedule H: Total Sales of Campaign Property (At	tach Schedule H)	•••••	•	
(Schedule H applies to Candidates' Con				<u> </u>
·	SUB-TOTAL	\$	93 م	. <u>5</u> 2
SUBTRACT TOTAL MONEY SPENT THIS PERIO				
Schedule B: Expenditures total (Attach Schedule B			783	.48
Schedule F: Loan Repayments total (Attach Sched	·		¥/11 5	
CASH ON HAND at the end of this reporting period (If final re			411.0	4
*UNPAID BILLS (From Schedule D - Attach Schedule D)				
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sche			/37/.	90
*OUTSTANDING LOANS (From Schedule F - Attach Sched	ule F)			
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES <u>X</u> N	0
ANDIDATE COMMITTEES ON V.				
:ANDIDATE COMMITTEES ONLY: 'ALUE OF CAMPAIGN PROPERTY (From Schedule H - Att	ach Schoolule LIV		•	

SCHEDULE

## For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN Α MONETARY (Rev. 07/03) (including candidate's personal funds) RECEIPTS COMMITTEE NAME (Must be same as on Statement of Organization) CHECK THIS BOX IF AMENDING FORM Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of Information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND RAISER INCOME
8/13/2010	CK# 6059	Duene - Betty Lanson 1670 320th St. Janaica, IA	•	\$ 25.00	
9/1/2010	ID#	Greene County Republican Party		150.00	
9/3/2010	CK# 581.4	Tod + antia Vandon		100.00	
7/2010	\ _(L/\.A\)	Scott - Sheila Hebenstreit		25.00	
1/14/2010		Consay Weldings 601 E. adams St. Jesson		100,00	
1/27/2010	ск# 785 <u>5</u>	Donita Souder 1502 235th St. Offerson	•	20.00	
9/27/2010	<b>A</b> 1/#	Guene County Republican Party		250,00	
	CK#				
	CK#				
	ID# CK#				
		· · · · · · · · · · · · · · · · · · ·	SUB-TOTAL	\$670	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consunguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

R INSTRUCTIONS, SEE BACK OF FORM		
·	SCHEDULE	
EXPENDITURES MONEY SPENT FROM COMMITTEE ACCORDINATE IN THE CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLE DATES LIST THE CANDIDATE IDENTIFICATION AND THE PROPERTY OF THE PROPERTY OF THE CANDIDATE IDENTIFICATION AND THE PROPERTY OF THE	<b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
DATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN HECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM S & CAMPAIGN DISCLOSURE BOARD.		CK THIS BOX IF

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR U CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COI PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTE	E NAME (Must be .	same as on Statement of Organization)		
Tom (	Contner 6	reene County Supervi	50°	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/10/2010	CK# 1025	action are phics 200 South Cremnel Rd Offerson In 50129	Lorg advertising	\$ 2
	ID#	1111100 JOING	secus .	\$ 282.48
	CK#			
	ID#			
	CK#			
	ID#		<u> </u>	
	CK#			
	ID# CK#		:	
	ID#			
	CK#			
	ID#			
Ì	CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$
			TOTAL (if last page of this schedule)	\$ 282.48

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IHIS	ROX	APPLIES	TO	CANDIDA	TEQ!	COMM	IITTEEC	ONL	<b>.</b>
		~		AUINDINU				ONL.	T :

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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FOR INSTRUCTIONS	SEE BACK OF FORM
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COMMITTEE NAME (Must be same as on Statement of Organization) Tom Contner Greene County Supervisor	SCHEDULE E (Rev. 06/97) CHECK	IN-KIND CONTRIBUTIONS (THIS BOX IF DING FORM
		- Total

DATE RECEIVED (MM/DD/YR)	NAME AND A	DRESS	RELATIONSHIP TO CANDIDATE	DESCRIPTION OF IN KIND	ESTIMATED FAIR MARKET	√ IF FOR
(	OF CONTRIB		* (if applicable)	CONTRIBUTION	VALUE	FUND-RAISER CONTRIBUTION
1/16/2010	Tom. Judy Co 2018 J Ave Granton, J	a Siuba	Same	Advertising Signs	1070.00	
7/2/2010		<i>Y</i>	Same	-	60.00	
7/14/2010	· -	<b>~</b>	Same	Newspaper aductioning	42.00	
16/2010	· · ·	-	Same	advertisings	179.00	
					٠.	
			,			
				SUB-TOTAL	\$ .	
				TOTAL (if last page of this schedule)	1371.00	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.